

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-weight: bold;">10/616394</div>	Filing Date		
							Applicant(s)			
7-30-04							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend				
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Total Indep			15							
Total Depend			33							
Total Claims			48							